



Statement on the planned restriction of the availability of ulipristal acetate emergency contraceptive pills in Poland

We, the undersigned organisations draw your attention to the current plans of the Ministry of Health in Poland to restrict access to emergency contraception, making it available only on prescription from a gynecologist.

As result of the C(2015)51¹ ruling from the European Commission, and upon recommendation from the European Medicines Agency (EMA), in January 2015 emergency contraceptive with ulipristal acetate, registered in Poland under the brand name *ellaOne*, received the authorization to be sold over-the-counter (without prescription) across the European Union (EU). The ulipristal acetate emergency contraceptive pill (UPA ECP) became available in Polish pharmacies without prescription from April 2015 contributing to rising the standard of reproductive health services and supplies for Polish women and girls, and expanding the postcoital contraceptive choices of women. Poland was not the only country that changed its policies of access to ECPs in 2015, following EMA's recommendation: Croatia, Germany and Italy also followed suit; and, in October 2016, Malta also decided to allow the sales of ECPs without prescription. Hungary is the sole EU country today that restricts the sales of UPA ECPs. Factors such as quality, safety and efficacy were taken into consideration when deciding to allow the sales of ECPs without prescription, since asking patients to obtain a prescription before using ECPs, compromise its efficacy.

UPA ECPs work by inhibiting or delaying ovulation. The sooner they are taken, the more likely they are to work before ovulation occurs. Given the importance of the timing for an effective use of postcoital contraceptive methods, restrictions to the free distribution of ECPs may violate a number of rights, including the rights to health, non-discrimination, gender equality, and to be free from ill-treatment².

In November of 2016 the Polish Minister of Health announced that he is finalising a project which aims to restrict access to UPA ECPs and reinstate the provision of a mandatory doctor's prescription for emergency contraceptives, citing the 'misuse of the pill' by teenage girls in Poland.

While there is limited data on the patterns of use of ECP among different age groups, a recent market study by Millward Brown³, the biggest age-group purchasing UPA ECPs are women between 25 and 30 years of age (45%), followed by those between 30 and 35 (18%). Young women below 18 make up to less than 2% of all buyers.

¹ http://ec.europa.eu/health/documents/community-register/2015/20150107130448/dec_130448_en.pdf

² BREAKING GROUND. 2015. Treaty Monitoring Bodies on Reproductive Rights. Center for Reproductive Rights

³ <http://www.newsweek.pl/polska/kto-kupuje-tabletke-dzien-po-minister-radziwill-klamie-badania,artykuly,400741,1.html>

We are concerned that the Polish Government's proposal would limit access to essential contraceptive services for thousands of women and girls throughout Poland; and disproportionately discriminate against women unable to access gynaecological services in a timely manner or not able to secure a visit at a private facility.

There are no medical reasons to restrict access to emergency contraceptives. The product is safe to use as shown by the World Health Organization Medical Eligibility Criteria of 2015, and the information about methods of use and possible side effects are easy to follow and accessible to all women and girls above 15 years of age⁴. While ECPs are not recommended for regular use (because they are less effective than other methods) repeated use of this method within a cycle or within a given period of time, does not pose any health risk. Taking ECPs is safe, while pregnancy comes with known health risks: continuing a pregnancy and giving birth or resorting to unsafe abortion both present significant higher risks, especially for young women⁵.

Women's and adolescent's right to contraceptive information and services is grounded in basic human rights protections. The Programme of Action from the International Conference on Population and Development⁶ recognized "the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice" while The CEDAW Committee has stated that reproductive rights include the right of women to autonomous decision-making about their health⁷ and that emergency contraception should be available without a prescription⁸. Accessible and affordable ECPs need to be part of the method mix offered to women, especially in countries where access to safe and legal abortion is under such restrictions as in Poland.

Restricting access to UPA ECPs would be a great step backward in the realization of women's and girl's reproductive health and rights in Poland. It would impose additional barriers in access to emergency contraception, contribute to the sales of this product from unsafe sources and also cause a rise in the number of unplanned pregnancies and abortions.

We call on the European Commission to encourage the EU Member States to follow the recommendations of the European Medicines Agency in regards to emergency contraception in order to secure women's and girls' reproductive rights and improve access to reproductive health services and supplies.

ASTRA Network
ASTRA Youth
CHOICE for Youth and Sexuality
European Consortium on Emergency Contraception
YouAct

December 1st, 2016

⁴ <http://www.who.int/mediacentre/factsheets/fs244/en/>

⁵ http://www.ec-ec.org/custom-content/uploads/2016/11/ICEC_Repeat-Use_Oct-2015.pdf

⁶ <http://www.unfpa.org/publications/international-conference-population-and-development-programme-action>

⁷ CEDAW Committee, Concluding Observations: Sierra Leone, para. 32, U.N. Doc. CEDAW/C/SLE/CO/6 (2014)

⁸ CEDAW Committee, Concluding Observations: Hungary, para. 31(b), U.N. Doc. CEDAW/C/HUN/CO/7-8 (2013)